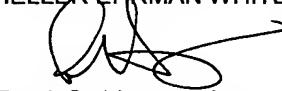


TRANSMITTAL OF UTILITY APPLICATION UNDER 37 C.F.R. §1.53	Attorney Docket No.	38349-0103H
	First named inventor	Mark E. Deem
	Express mail label #	EV335462911US
	Date of mailing	<u>July 29, 2003</u>

22154 U.S.P.T.O.
10/630473
07/29/03

Application Elements	Accompanying Application Papers
1. <input checked="" type="checkbox"/> Fee Transmittal Form	6. <input checked="" type="checkbox"/> Copy of assignment documents from parent application
2. <input checked="" type="checkbox"/> Specification containing 18 pages (including Claims and Abstract).	7. <input type="checkbox"/> Preliminary Amendment
a. Title: METHODS AND DEVICES FOR USE IN PERFORMING PULMONARY PROCEDURES	8. <input checked="" type="checkbox"/> Return Receipt Postcard
b. Number of claims: 8	9. <input type="checkbox"/> Small Entity Statement
3. <input checked="" type="checkbox"/> 8 sheets of drawings	10. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent.
4. <input checked="" type="checkbox"/> Declaration (copy from parent application)	
5. <input type="checkbox"/> Sequence Listing	
<input type="checkbox"/> Paper copy (identical to computer copy)	
<input type="checkbox"/> Computer readable copy	
<input type="checkbox"/> Verified statement	
SIGNATURE OF ATTORNEY/AGENT	
 HELLER EHRLMAN WHITE & McAULIFFE LLP Fred C. Hernandez Registration Number: 41,832	

Benefit of priority: Benefit of priority to U.S. Patent Application Serial No. 09/519,735 filed March 4, 2000. The subject matter of that patent application is incorporated into this application in its entirety.

CORRESPONDENCE ADDRESS	
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FEE TRANSMITTAL ACCOMPANYING UTILITY APPLICATION UNDER 37 C.F.R. §1.53	Attorney Docket No.	38349-0103H
	First named inventor	Mark E. Deem
	Express mail label #	EV335462911US
	Date of mailing	<u>July 29, 2003</u>

FEE CALCULATION FOR CLAIMS AS AMENDED

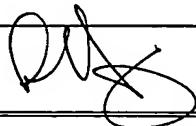
a)	Basic Fee	\$750/\$375	\$ 375.00
b)	Independent Claims	<u>8 - 3 = 5</u> x \$84/\$42	\$ 210.00
c)	Total Claims	<u>8 - 20 = 0</u> x \$18/\$9	\$ 0.00
d)	Fee for Multiple Dependent Claims	= \$280/\$140	\$ 0.00
		TOTAL FILING FEE	\$ 585.00

Applicant is a small entity.

A check is enclosed in the amount of \$585.00 to cover the fee for filing the application.

Charge \$_____ to Deposit Account No. 50-1213.

The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

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Submitted by:					
Typed or printed name	Fred C. Hernandez			Reg. Number	41,832
Signature		Date	7/29/03	Deposit Account	50-1213